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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
09/716,104	11/17/2000	Nandu Gopalakrishnan	6-4-6-7-15-10

**CONFIRMATION NO. 6699**

30594  
 HARNESS, DICKEY & PIERCE, P.L.C.  
 P.O. BOX 8910  
 RESTON, VA 20195



\*OC000000017653352\*

Date Mailed: 12/14/2005

**NOTICE REGARDING CHANGE OF POWER OF ATTORNEY**

This is in response to the Power of Attorney filed 12/08/2005.

- The Power of Attorney to you in this application has been revoked by the assignee who has intervened as provided by 37 CFR 3.71. Future correspondence will be mailed to the new address of record(37 CFR 1.33).

SHARON KUANG  
 PTOSS (703) 305-3006

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09/716,104	11/17/2000	Nandu Gopalakrishnan	6-4-6-7-15-10

**CONFIRMATION NO. 6699**

46368  
 CARLSON, GASKEY & OLDS, P.C.  
 400 W MAPLE RD  
 SUITE 350  
 BIRMINGHAM, MI 48009



\*OC000000017653419\*

Date Mailed: 12/14/2005

**NOTICE OF ACCEPTANCE OF POWER OF ATTORNEY**

This is in response to the Power of Attorney filed 12/08/2005.

The Power of Attorney in this application is accepted. Correspondence in this application will be mailed to the above address as provided by 37 CFR 1.33.

SHARON KUANG  
 PTOSS (703) 305-3006

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